







VFT: 1 Community of Promise

2008 Town Hall Meetings:

Mobilizing
Communities
To Prevent
and Reduce
Underage
Alcohol Use

EVALUATION REPORT



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention www.samhsa.gov





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Mobilizing Communities To Prevent and Reduce Underage Alcohol Use

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Executive Summary

"Underage alcohol consumption in the United States is a widespread and persistent public health and safety problem that creates serious personal, social, and economic consequences for adolescents, their families, communities, and the Nation as a whole."

ccording to *The U.S. Surgeon General's Call to Action To Prevent and Reduce Underage Drinking,* "Underage alcohol consumption in the United States is a widespread and persistent public health and safety problem that creates serious personal, social, and economic consequences for adolescents, their families, communities, and the Nation as a whole." Underage drinking is a leading contributor to death from injuries, which are the main cause of death for people under age 21, and is associated with risky sexual behavior, academic failure, illicit drug use, tobacco use, and a range of physical consequences, from hangovers to death from alcohol poisoning. In addition, underage drinking can cause alterations in the structure and function of the developing brain.¹

As part of the national effort to prevent and reduce underage alcohol use, the Substance Abuse and Mental Health Services Administration (SAMHSA) in collaboration with the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) sponsored local Town Hall Meetings (THMs) nationwide. With the support of SAMHSA, ICCPUD, the National Prevention Network, and Leadership to Keep Children Alcohol Free Foundation, 1,811 THMs were convened through community-based organizations (CBOs). The THMs provided communities with the opportunity to come together to learn more about underage drinking and its impact on individuals, families, and the community. Importantly, the THMs provided a forum for communities to discuss ways they can best prevent and reduce underage alcohol use.

Details provided by CBOs on THMs held in their respective communities indicate—

- There was extensive media support of the THMs from newspapers, radio, and local TV stations. The use of brochures/flyers and e-mail to promote THMs also ranked high.
- The majority of attendees had very positive reactions to the THMs.
 Similarly, the majority of CBOs were very or somewhat satisfied with the outcomes of the THMs.
- Nearly all CBOs perceived that attendees increased their awareness of the negative impact of underage alcohol use and that attendees will become more involved in decreasing underage drinking in their community.

¹ U.S. Department of Health and Human Services (HHS). 2007. *The Surgeon General's Call to Action To Prevent and Reduce Underage Drinking* (electronic version), pp. 10–11. Retrieved from http://www.surgeongeneral.gov/topics/underagedrinking/.





- Numerous CBOs took actions to follow up on the momentum gained during the THMs by planning to host future events, forming safe home parent networks and other action groups, implementing social host ordinances, and developing strategic plans to reduce and prevent underage drinking.
- There was diverse community support and wide-ranging participation from adults and youth in the THMs.
- A variety of creative methods were utilized in the THMs, including drama presentations and interactive games/game shows.
- A broad number of resources were successfully used in the THMs, such as local and national statistics on underage alcohol use, the Surgeon General's *Call to Action*, and planning materials that were provided by SAMHSA.

The report that follows provides additional insight into the collective efforts of communities to respond to the *Call to Action* through the THMs.





Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD)

Established in 2004 by the U.S. Department of Health and Human Services to address the issue of underage drinking, ICCPUD includes the following Federal agencies:

U.S. Department of Defense

Office of the Assistant Secretary of Defense

U.S. Department of Education

Office of Safe and Drug Free Schools

U.S. Department of Health and Human Services

Administration for Children and Families

Centers for Disease Control and Prevention

National Institute on Alcohol Abuse and Alcoholism

National Institute on Drug Abuse

Office of the Assistant Secretary for Planning and Evaluation

Office of the Surgeon General Substance Abuse and Mental Health Services Administration

U.S. Department of Justice

Office of Juvenile Justice and Delinquency Prevention

U.S. Department of Transportation

National Highway Traffic Safety Administration

U.S. Department of Treasury

Alcohol and Tobacco Tax and Trade Bureau

Office of National Drug Control Policy

Federal Trade Commission

Introduction

he Substance Abuse and Mental Health Services Administration (SAMHSA) and its Center for Substance Abuse Prevention in collaboration with ICCPUD mobilized community-based organizations (CBOs) to prevent and reduce underage alcohol use by sponsoring locally based Town Hall Meetings (THMs). Building upon the successes of the 2006 THMs, SAMHSA sponsored the meetings again in 2008 with the support of ICCPUD and the National Prevention Network.² The THMs provided communities with an opportunity to engage youths and adults in a discussion of this serious public health issue and of strategies for taking action.

In 2007, the U.S. Surgeon General issued a *Call to Action To Prevent and Reduce Underage Drinking* to communities across the country.

The THMs served as a platform for supporting several *Call to Action* goals, including—

- Foster changes in American society that facilitate healthy adolescent development and that help prevent and reduce underage drinking (UAD).
- Engage parents and other caregivers, schools, communities, all

levels of government, all social systems that interface with youth, and youth themselves in a coordinated national effort to prevent and reduce UAD and its consequences.

- Promote an understanding of underage alcohol consumption in the context of human development and maturation that takes into account individual adolescent characteristics as well as environmental, ethnic, cultural, and gender differences.
- Work to improve public health surveillance on UAD and on population-based risk factors for this behavior.³

The THMs represent an important step in implementing the *Call to Action* which states, "Underage alcohol use is everybody's problem—and its solution is everybody's responsibility."⁴

This report documents how the THMs contributed to the implementation of the *Call to Action*. Also included is a discussion of the barriers and challenges that confronted the CBOs in planning and convening the THMs, as well as recommendations for future THMs.

² The National Prevention Network, a component of the National Association of State Alcohol and Drug Abuse Directors, is an organization of State alcohol and other drug abuse prevention representatives that provides a national advocacy and communication system for prevention.

U.S. Department of Health and Human Services (HHS). 2007. The Surgeon General's Call to Action To Prevent and Reduce Underage Drinking (electronic version), p. 37. Retrieved from http://www.surgeongeneral.gov/topics/underagedrinking/.

⁴ HHS. 2007. The Surgeon General's Call to Action To Prevent and Reduce Underage Drinking (electronic version), p. 75. Retrieved from http://www.surgeongeneral.gov/topics/underagedrinking/.





Strong Community Support of the Town Hall Meetings

he THMs had strong support from the communities in which they were held. This year, 1,604 CBOs held 1,811 THMs, compared with 1,230 CBOs that held 1,510 meetings in 2006. This is an increase of over **30 percent** in CBO participation and nearly **20 percent** in THMs held. THMs were held in every State, five U.S. Territories, and the District of Columbia. CBOs reached out to many different racial

"We conducted two separate THMs—one in English and one in Spanish. The Spanish-language forum was where more parents brought their children and were very participatory in the discussion. We were advised that they never had the opportunity to attend a forum that offered them the ability to voice their issues and concerns."

and ethnic groups, including African American, Alaska Native, American Indian, Chinese, Ethiopian, Hispanic, and Somalian. Some of the THMs were convened in other languages (63 in Spanish, for example) as a means to engage non-English-speaking populations.

CBOs that agreed to participate in this initiative were asked to provide details about the results of the THMs

held in their community. SAMHSA provided CBOs with a four-page Office of Management and Budgetapproved evaluation form (see Appendix A) to record the successes of the THMs. A total of 1,379 CBOs provided evaluation forms on 1.559 THMs. The response rate of the number of CBOs returning feedback forms was 86 percent. Responses were received from CBOs across all 50 States, the District of Columbia, and 3 of the 5 U.S. Territories. Information provided hereafter is from the evaluation forms that were submitted by the CBOs.

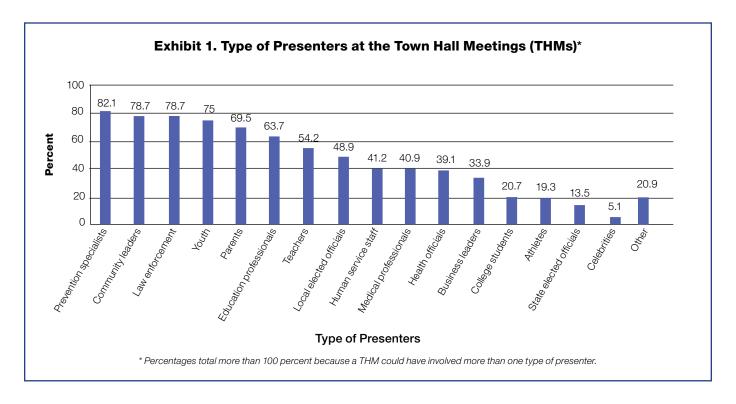
The THMs were attended by as many as 1,350 adults, with the average number being 44.58. The number of youth attending was as high as 1,000, with the average number being 40.69. Among the evaluation forms were 26 that described participants other than adults and youth. Ten forms reported a total of 2,179 unspecified attendees. The remaining 16 forms provided numbers on market reach for TV, radio, and/or newspapers, with 140,192 as the highest market reach.

CBOs brought together a broad array of community members to serve as THM presenters. Community members collaborated so that they could not only learn more about the science and consequences of UAD

⁵ Participating U.S. Territories were American Samoa, Guam, Northern Mariana Islands, Palau, and the U.S. Virgin Islands.







but also discuss how their community could best prevent UAD by reducing demand, availability, and access. As shown in Exhibit 1, over two-thirds of the THM presenters included prevention specialists (82.1 percent), community leaders (78.7 percent), law enforcement (78.7 percent), youth (75.0 percent), and parents (69.5 percent). Among other major presenters for the THMs were education professionals (63.7 percent), teachers (54.2 percent),

local elected officials (48.9 percent), human service staff (41.2 percent), medical professionals (40.9 percent), health officials (39.1 percent), business leaders (33.9 percent), and college students (20.7 percent). One-fifth of THMs (20.9 percent) included other presenters such as the following:

- Persons in recovery
- DUI victims and advocates
- Coroners

- Attorneys
- Judges
- Faith-based leaders
- Counselors
- Treatment professionals
- Emergency services personnel
- Representatives from Mothers Against Drunk Driving and Students Against Destructive Decisions.

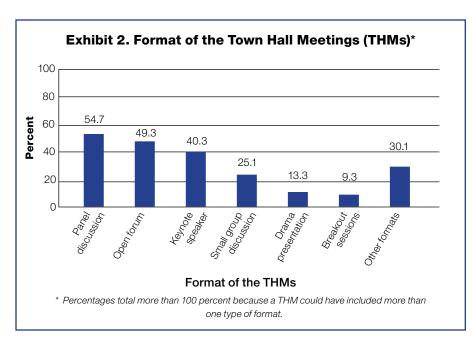


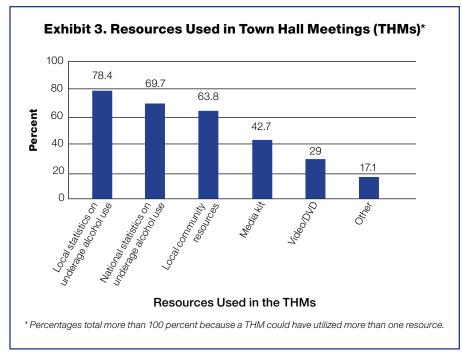


Multiple Successful Approaches

he settings, formats, and contents of the THMs were as diverse and creative as the participants. THMs were conducted in community centers, public libraries, hotels, public and private schools, colleges, and religious institutions in rural, metropolitan, and urban areas. The majority of the THMs (54.7 percent) included panel discussions, followed by open forums (49.3 percent), keynote speakers (40.3 percent), small group discussions (25.1 percent), drama presentations (13.3 percent), breakout sessions (9.3 percent), and other formats (30.1 percent) (see Exhibit 2). Other formats of the THMs included large group discussions, question and answer sessions, multimedia presentations, world café style forums, and interactive games/game shows. Many of the THMs served refreshments and provided entertainment to draw community members to the event.

Multiple resources were used to emphasize the problem of UAD at the local and national levels. Many CBOs utilized materials that were provided by SAMHSA in the Community Briefing Prevention Toolkit: Town Hall Meetings, including the Surgeon General's Call to Action and accompanying Action Guides for Families and Communities. Other materials used from the toolkit include the facilitator's guide, brochures, the "How To Conduct a Town Hall







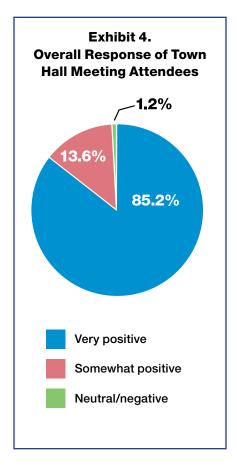


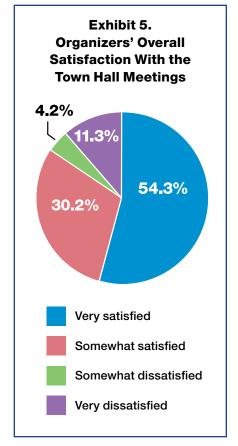
Positive Reactions to the Town Hall Meetings

Meeting" video and materials, and the THM power-point presentation. In addition to the materials provided by SAMHSA, local community resources were utilized in 63.8 percent of the THMs. Over two-thirds of the THMs used local (78.4 percent) and national (69.7 percent) statistics on underage alcohol use. A media kit was also included in the toolkit provided by SAMHSA, and it was utilized in 42.7 percent of the THMs. Almost 30 percent (29.0 percent) of the THMs included video/DVD presentations. Other resources, used by 17.1 percent of the THMs, included handouts, survey results, locally created multimedia presentations, and other SAMHSA materials. Exhibit 3 provides details of the various resources used in the THMs.

s reported by the CBOs, attendee responses to the THMs were overwhelmingly positive. The majority (85.2 percent) reported that attendee responses were very positive to the THM. Over one-tenth (13.6 percent) reported that attendee responses were somewhat positive, while a little over 1 percent (1.2 percent) reported responses as neutral/negative (see Exhibit 4). Many of the CBOs surveyed attendees at the conclusion of their THMs to provide these data.

In addition to reporting on the overall response of attendees to the THMs, organizers reported on their overall satisfaction with the meetings. The vast majority (84.5 percent) reported being very or somewhat satisfied with the THMs. Slightly more than one-tenth of organizers (11.3 percent) were very dissatisfied, compared with less than 5 percent (4.2 percent) that were somewhat dissatisfied with the THMs (see Exhibit 5).





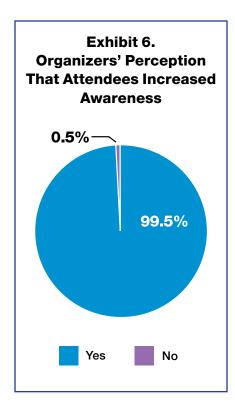




A Pathway to Increase Awareness and Involvement

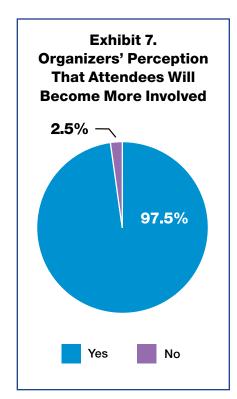
he THMs served as a pathway to increase community awareness of the negative effects of underage alcohol use and to get communities more involved in working to prevent and reduce UAD. As shown in Exhibit 6, over 99 percent of CBOs (99.5 percent) perceived that attendees increased their awareness of the negative impact of underage use of alcohol in their communities by attending the THMs. Similarly, as shown in Exhibit 7, over 97 percent of CBOs (97.5 percent) perceived that attendees will become more involved in working on decreasing underage alcohol use in their communities.

CBOs indicated that parents plan to become more involved in decreasing UAD by developing more alcohol-free activities for themselves and their children, talking with their teenagers about UAD, and spending more one-on-one time with their teen. Parents also plan to become more knowledgeable about their children's social activities and friends,



reducing access to alcohol to youth and their friends, and starting a parent network or support group.

Moreover, CBOs also indicated that communities plan to become more involved in reducing UAD by joining



a coalition (existing or new), creating more alcohol-free alternative activities for teens, and volunteering with youth activities.





Extensive Media Support of the Town Hall Meetings

lanners of the THMs were encouraged to get the local and State media to collaborate in their efforts. As shown in Exhibit 8, the majority of THMs reporting media promotion and support received coverage from newspapers (77.3 percent), radio (44.7 percent), and local TV stations (30.3 percent). Many THM organizers reported having newspaper articles written (52.7 percent) and newspaper ads placed (33.4 percent) about the THMs held in their communities. A few of the THMs included a live radio or TV broadcast (6.9 percent), and a small number received national TV exposure (0.4 percent). In addition to print media, radio, and TV, CBOs used brochures and flyers (78.3 percent),

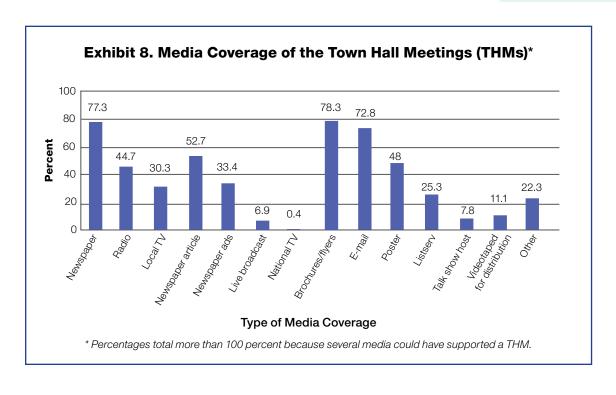
e-mail (72.8 percent), posters (48.0 percent), Listservs (25.3 percent), and a talk show host (7.8 percent) to promote and support the THMs in their communities. Moreover, onetenth of the THMs (11.1 percent) were videotaped for distribution to larger audiences.

In over 20 percent (22.3 percent) of the THMs, other methods were utilized to promote and support the THM. Other methods utilized included the following:

- Web sites
- Blogs and message boards
- Newsletters (paper and electronic)
- School announcements

- Church bulletins/announcements
- Billboards, banners, marquees, and signs
- Community calendar postings
- Direct mailings (postcards, letters, and invitations)
- Telephone calls and faxes
- Word-of-mouth.

"A few of the THMs included a live radio or TV broadcast (6.9 percent), and a small number received national TV exposure (0.4 percent)."



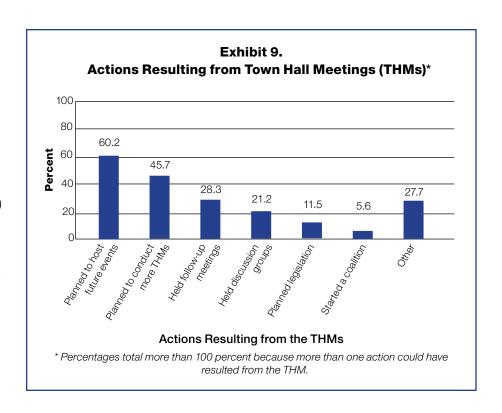




Successful Outcomes

articipating CBOs took various actions to follow up on the momentum gained during the THMs. Nearly two-thirds (60.2 percent) plan to host future events and just about half (45.7 percent) plan to conduct more THMs. Over one-quarter of CBOs (28.3 percent) have already held follow-up meetings, and over one-fifth (21.2 percent) have held discussion groups. About 12 percent (11.5 percent) of the organizers have planned legislation, while nearly 6 percent (5.6 percent) started a coalition. Over one-quarter of CBOs (27.7 percent) reported taking other actions as a result of the THMs (see Exhibit 9). Other actions taken included the following:

- Recruiting coalition members.
- Forming safe home parent networks.
- Implementing social hosts ordinances.
- Collaborating with other agencies and programs.
- Developing strategic plans to reduce and prevent UAD.
- Conducting additional follow-up meetings and discussions.
- Applying for additional funding to sustain UAD prevention efforts.
- Creating UAD prevention action groups (e.g., committees, task forces, and advisory boards).







Barriers, Challenges, and Recommendations

BOs described the numerous barriers and challenges presented as they planned and conducted the THMs. They also offered recommendations for future THMs. Summaries of their comments concerning barriers, challenges, and recommendations are as follows.

Barriers

- Parents who did not attend meetings with their children.
- Competition represented by many other school activities.
- Community norms that reflect tolerance of underage alcohol use.
- Adult apathy.
- Community focus on youth drug use (other than alcohol).
- Perception that underage drinking is not a serious problem.

Challenges

- Enlarging the scope of community support for preventing substance abuse to embrace underage drinking.
- Ensuring good turnout.
- Receiving planning materials late.
- Adhering to the proposed timeframe for the THM.
- Competing with other local THM events.

Recommendations

- Provide larger stipend.
- Suggest how to maximize stipend and identify potential public/private resources for additional funding for THMs and other underage drinking prevention activities.
- Supply talking points for panelists participating in THMs.
- Support ongoing communications with and among past THM sponsors, supporters, and participants.
- Present additional ways to maximize community and media support.
- Post/distribute materials earlier.
- Propose another timeframe in which the THM can be convened.
- Develop materials that can be used throughout the year.

The 2008 Town Hall Meetings provided communities with a forum to answer the Surgeon General's *Call to Action*. All meetings reflected the concerns that underage alcohol use is a critical problem affecting our communities and that every effort should be made to employ comprehensive approaches to addressing it. An important outcome from the THMs is that many communities pledged to continue their efforts to prevent and reduce underage alcohol use.

Overall, the support that was provided by SAMHSA and the *Call to Action* helped to empower communities to collectively address the problems of underage alcohol use and continue that work into the future.



Appendix A: **Evaluation Form**

OMB No. 0930-0288 Expiration Date: 01/24/2011

	Underage Dr	rinking Prevention: To	own Hall Meeting Fee	edback Form				
	The purpose of this form is to obtain feedback on this meeting. Please do not put your name anywhere on this form. Results will be used to inform similar future events. It is important to obtain information from all participants to maintain quality of service; however, your participation is voluntary.							
D	escription of Meeting	;						
L	ocation of Meeting:		Date of Meeting:					
 2. 	Which of the follow Meeting?	ion coordinating Town Hall	ganization represent for th	ne Town Hall				
	NPN lead	SSA lead	Coordinator/Organizer					
3.		y)at of the Town Hall Meeting						
	Panel discussion	Small group						
	Open forum	Drama prese						
	Keynote speaker	☐ Breakout ses	sions					
	Other (please specify	v)						

Over→

4.	Who participated	d in the p	presentation at th	ne Town Hall M	eeting? (<i>Che</i>	eck all t	hat apply)		
	Community leade Medical professio Prevention special Law enforcement Business leaders Teachers Health officials College students	nals		Education profe Human service s Local elected of Celebrities Youth Parents Athletes State elected off	staff ficials				
	Other (specify)								
5.	What were some of the major actions taken as a result of the Town Hall Meetings (THMs)? (check all that apply)								
	Started a coalition			Plan to conduct more THM					
	Held follow-up meetings Held discussion groups		☐ Host future events☐ Plan legislation						
	Other (please spec	cify)							
6.	What type of media promoted the Town Hall Meeting? (check all that apply)								
	Radio		Local TV		National TV				
	Newspaper		Live broadcast		Newspaper an	rticle			
	Newspaper Ads		Talk show host		E-mail				
	ListServ		Brochures/Flye	rs \square	Posters				
	Videotaped for distribution								
	Other (specify)								

•	What was the number and composition of the Town Hall Meeting audience excluding panel participants?					excluding panel				
	Adults []		Youth						
•	What wa	What was the overall response of the Town Hall Meeting attendees? (check one only)								
	Very posi	itive _] So	mewhat positive		Neutral		Negative		
•	Did you u that apply	-	of the n	naterials provide	d in the	Town H	all Mee	ting Resou	rce Kit? (check all	
		statistics	on und	ge alcohol use erage alcohol use es			Video/ Media			
	Other (ple	ease spec	rify)						-	
0.		Do you think attendees increased their awareness of the negative effects of underage use of alcohol in your community?								
	Yes		No							
1.	Do you th	hink they	y will b	ecome more invo	olved in	working	on deci	reasing und	lerage alcohol use	
	Yes		No							
2.	How will they become more involved?									

Over→

Overall, how satisfied	Overall, how satisfied are you with the Town Hall Meeting? (check one)							
Very dissatisfied		Somewhat dissatisfied						
Somewhat satisfied		Very satisfied						
Is there anything else	you woul	d like to share about your T	own Hall Meeting?					
			_					

THANK YOU VERY MUCH FOR PARTICIPATING.

Please <u>return this form using the provided self-addressed, stamped envelope</u> or mail to:

Rená A. Agee Macro International Inc. 11785 Beltsville Drive, Suite 300 Calverton, MD 20705

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